

TRICARE Global Remote Overseas

New Rule Affects TGRO Remote Site Beneficiaries

Col (Dr.) James Rundell

Executive Director, TRICARE Europe

One year ago, TRICARE introduced the *TRICARE Global Remote Overseas* (TGRO) program to many Remote Site locations worldwide. With our partner, International SOS, we now offer Prime beneficiaries quality health care without tedious forms, lengthy paperwork, or up-front payments. Remote site beneficiaries in remote locations now have access to a worldwide network of credentialed doctors, dentists, hospitals, and clinics — the best services available at each remote site location.

We continue to work to make the Remote Site health care experience comparable to the care available at U.S. military hospitals and clinics. But the only way we can guarantee the quality of the TRICARE benefit in remote locations is to require that all remote beneficiaries in locations covered by TGRO use International SOS to coordinate all non-emergency appointments.

Beginning on Jan. 1, 2005, all TRICARE Prime beneficiaries enrolled in TRICARE Prime Global Remote Overseas areas must coordinate all routine care with International SOS.

If TGRO Prime beneficiaries fail to coordinate routine care with International SOS after Jan. 1, they will have to pay

a substantial percentage of the bill:

- Active Duty family member claims will be processed at the Point-of-Service rate, which means these members will have to pay a substantial deductible as well as cost-shares.
- Active Duty claims may be denied.

Beneficiaries stationed at a U.S. embassy may continue to see an Embassy Health Unit provider for part or all of their primary routine health care. Beneficiaries who use their Embassy Health Unit don't need to call International SOS for routine care, but International SOS must still coordinate **all specialty care** — even if the referral comes from an Embassy Health Unit provider.

Of course, if emergency or urgent care is required, beneficiaries do not need to first contact International SOS. Beneficiaries may simply go to the nearest location where emergency services are available. After receiving urgent and emergency care, Active Duty members must contact International SOS and their parent Service unit as soon as possible; Active Duty family members should contact International SOS as soon as possible.

A more detailed overview of the TGRO program is available online at www.europe.tricare.osd.mil.

I want to thank all of our TGRO Prime beneficiaries for their support and patience over the past year as we've rolled this program out across the world. We're confident that this new requirement will pave the way to an even stronger benefit for all TGRO Prime members and their families.

Debt Collection Assistance Just a Phone Call Away

MSgt Lisa Poss

*Senior Enlisted Advisor &
Debt Collection Assistance Officer*



TRICARE established the Debt Collection Assistance Officer (DCAO) program to help beneficiaries understand and get assistance with TRICARE-related debt collection problems.

If you receive a notice from a collection agency or a negative credit report because of a medical or dental bill, you should call or visit the nearest Military Treatment Facility (MTF) DCAO.

The DCAO cannot provide you with legal advice or fix

your credit rating, but can help you through the debt collection process by providing you with documentation for your use with the collection or credit reporting agency in explaining the circumstances relating to the debt.

Other resources are in place at TRICARE Service Centers and MTFs to help beneficiaries who are having problems with TRICARE claims, but who have not been sent to collection agencies or who have questions about the TRICARE program. These resources include Beneficiary Counseling and Assistance Coordinators (BCACs), formerly known as Health Benefits Advisors, who can assist you with your concerns.

Three Clicks & You're Done! New Customer Comment Card Debuts

Capt Ted Lemon

Chief, Information Officer

Have you ever been referred to a host nation provider? How was your experience? TRICARE Europe wants to know.

We recently redesigned our Host Nation Provider Customer Comment Card so you can tell us about your experience more quickly and easily.

You should receive a print version of this card every time you are referred off-base for care from your TRICARE Service Center.

If you would rather fill out the form online, just visit us at www.europe.tricare.osd.mil. With our new Comment Card design, you can complete the quick questionnaire in just three clicks!

Your feedback is very important to us. We understand that host nations have differing cultural practices and varying medical standards, but that

TRICARE Europe
Host Nation Medical Care Customer Comment Card

Where did you receive care? Please provide the information below.

Name of Clinic/Provider	
Location/Address	
Facility where your medical records are located	
Date of appointment/date of care	

Were you satisfied with your experience with the Host Nation Provider? Yes ☐ No ☐

Would you return to this provider for medical care? Yes ☐ No ☐

Please rate the following items by filling in the circle next to your rating. If an item does not apply, mark the "N/A" circle.

First impression	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Provider Customer Service	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Staff Customer Service	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Quality of medical care	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Quality of patient instructions	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Provider's ability to speak English	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Staff's ability to speak English	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Facility cleanliness	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A
Overall impression	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Okay	<input type="radio"/> Poor	<input type="radio"/> Awful	<input type="radio"/> N/A

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Customer Comment Card

Welcome to the new Host Nation Provider Customer Comment Card site! This is your opportunity to tell us about your Host Nation provider experience.

Why do we use Host Nation providers?

Our Military Treatment Facilities (MTFs) are typically sized to serve military patients and their families who are assigned to a particular area. We often use Host Nation providers for specialty care at many MTFs because there are not enough cases to justify a full-time military provider at each military hospital or clinic. Also, it is impractical to make each MTF large enough to handle contingency operations or other instances when demand is temporarily very high. We aim to strike a balance between MTF size and our Host Nation network to ensure that you get the quality, cost effective care that you need. Host nations have differing cultural practices and varying medical standards, but that does not mean you should expect lower standards of care. Your comments help us ensure that you receive quality, cost effective, and accessible medical care through our Preferred Provider Network.

Please select the appropriate answer to the questions provided.

Date of care (Example: mm/dd/yyyy) (MM/DD/YYYY)

Were you satisfied? ☐ YES ☐ NO

Would you return to this provider for medical care? ☐ YES ☐ NO

Please select a location where your records are kept:

[Click here to download the Host Nation Customer Comment Card in MS Word format.](#)

Note: If you would like to submit comments about your experience at a Military Treatment Facility, please use the [Interactive Customer Evaluation \(ICE\)](#) site. If you are a member of the Remote Site Health Care Program and wish to tell us about your Remote Site provider experience, please use the [International SOS Customer Satisfaction Survey](#).

does not mean you should expect lower standards of care. Your comments help us ensure that you receive quality, cost effective, and accessible medical care from your host nation providers.

It's fast, it's easy, and you can help us make the TRICARE program even better.

Retirees: Medicare Part B Enrollment Update

Courtesy TRICARE Management Activity

The Medicare Prescription Drug, Improvement and Modernization Act of 2003 (MMA) has a provision that directly impacts certain Medicare-TRICARE dual-eligible beneficiaries.

It eliminates the Medicare Part B surcharge for uniformed services beneficiaries who were subject to a higher premium (currently paying more than \$66.60 a month) for enrolling in Part B during the years 2001 to 2004.

Under the MMA, Medicare Part B premiums will be reduced for these beneficiaries to the regular monthly

premium rate and beneficiaries will be reimbursed for any surcharges paid in 2004.

These refunds will be provided in Social Security retirement checks. In mid-September, the Social Security Administration (SSA) will send a statement that clearly explains these changes.

The legislation also provides the opportunity for uniformed services beneficiaries who are entitled to Medicare Part A but are not enrolled in Medicare Part B to enroll in Part B without a premium surcharge. These beneficiaries will be offered the op-

portunity to enroll in Part B during a Special Enrollment Period.

The SSA will mail a Special Enrollment Period notice in mid-September 2004 to uniformed services beneficiaries who are entitled to Medicare Part A but are not enrolled in Medicare Part B.

Affected beneficiaries will also receive a letter from the Department of Defense (DoD) regarding these changes in the law.

The DoD letter will give beneficiaries a heads-up that they will soon be receiving a Special Enrollment Period notice from the SSA.

TRICARE Europe Beneficiary Feedback

The information in this column features frequently asked questions from beneficiaries and answers provided by the TRICARE Europe Office staff.

Q: *I will be retiring soon and want to obtain additional health insurance from my new employer. They are requesting a "certificate of creditable coverage" from my previous health insurance company. Can my local TRICARE Office issue this certificate?*

A: Certificates of creditable coverage are issued to any person previously covered under TRICARE who loses eligibility due to a separation or retirement. Forward your written request to the Defense Manpower Data Center Support Office; Attn: Certificate of Creditable Coverage; 400 Gigling Road; Seaside, California 93955-6771.

Certificates cannot be requested by phone, but if you have an urgent request, you can fax your request to the DSO at (831) 655-8317 and request that DSO fax it to a particular number.

Q: *Can dependent parent/parent-laws enroll in TRICARE Prime or use TRICARE Standard?*

A: Dependent parents or parent-in-laws who reside with their active duty or retired military sponsors in Europe may use Military Treatment Facilities (MTFs) on a space available basis, but their TRICARE benefits are limited to the Senior Pharmacy Program.

While dependent parents are entitled to direct care in the military system if space is available, they are ineligible for TRICARE Prime, Standard, Extra, or TRICARE For Life. Congress mandates this policy. TRICARE Plus is not avail-

able to dependent parents overseas, although it is an option at many stateside MTFs. Providers at military hospitals try to see as many patients as possible, but increased operations tempo and heavy deployment loads has led to limited space availability Europe-wide. If dependent parents are referred to host nation providers for care and do not have private health insurance, they will have to pay for this civilian care out-of-pocket.

Q: *My dependent son just graduated from high school and will attend college in the states. What do I need to do to keep him enrolled to TRICARE while he is away at school?*

A: Please ensure that his DEERS information is current. Most TRICARE claims are denied because of expired ID cards. To verify your student's DEERS information and eligibility, visit the nearest uniformed services ID card-issuing facility (your personnel office). You can also call the DEERS Support Office (DSO) at 1-800-538-9552.

TRICARE covers dependent children up to age 21. Coverage is available up to 23 years of age if the child is a full-time student. If he is attending a school near a Military Treatment Facility (MTF), you can contact the closest TRICARE service center (TSC) to the school and request an enrollment transfer. This transfers his TRICARE Prime from his current enrolled location to the gaining TSC without a break in his enrollment. There are no enrollment fees required for Active Duty dependents enrolling or transferring TRICARE Prime.

If he will not be near an MTF and TRICARE Prime is not offered in the area where he will be attending school, he will need to disenroll from TRICARE Prime (Europe) and remain in TRICARE Standard while at school. For more information, please visit your local TRICARE service center.

Long-Term Care Enrollees Urged to Use Coordination

Samantha L. Quigley
American Forces Press Service

Though many enroll for the Federal Long Term Care Insurance Program, very few know what long-term care is and how to get the greatest benefit from it, an official with the program said.

"People have very little understanding of what long-term care is and what long-term care insurance will be able to do for them until they really need it," Mary Lou McGuinness, a nurse and director of care coordination/claims for the Federal Long Term Care Insurance Program, said. "I think the understanding is diminished because it is a very complicated subject."

"And I think when they have an immediate need for the services, that's when they tend to try to tap into whatever resources they have to give them the information to answer their questions," she continued. "The problem is that the need for the knowledge is often very urgent by the time they need it."

To avoid the emotional toll on caregivers charged with making decisions about a loved one's care, McGuinness suggests utilizing the program's care-coordination services to develop a plan for the future. Having an idea of what is available before there's a critical need can alleviate some of the stress involved in decision making.

Coordinators, all registered nurses who have worked in long-term care situations previously, are available to assist with that process. They can provide general information, assessment and approval of the need for long-term care and help develop a care plan.

Also, for consistency, enrollees are assigned a coordinator who will monitor and reassess the services being provided and provide access to discounts for services, when available. The coordinators also check the licenses of long-term care facilities or provide caregiver training for individuals. In any case, the enrollee has the final say in the care plan.

McGuinness also reminded enrollees that the coordination services extend to qualified relatives. This can be especially helpful if the enrollee does not live in the same state as his or her parents.

While qualified relatives are not eligible to receive benefits beyond the coordination services, they can get help in

coordinating the benefits they do have through private insurance or Medicare.

There is often confusion about what long-term care insurance will cover.

Essentially, McGuinness said, if care is needed for more than 90 days, long-term care could apply. Severe cognitive impairments, such as Alzheimer's disease, also qualify for long-term care.

The Federal Long Term Care Insurance Program is meant to cover expenses associated with long-term care available in a nursing home, assisted-living facility or an enrollee's home.

Launched in March 2002, the program is the largest employer-sponsored long-term care insurance program and the largest group program in the country. The program provides over 20 million eligible enrollees access to long-term care insurance as a voluntary benefit, meaning the employee pays all costs.

Corporate Address:

Long Term Care Partners, LLC
100 Arboretum Drive
Portsmouth, NH 03801-7833

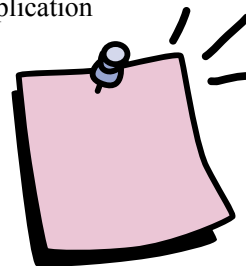
Billing Address:

Long Term Care Partners, LLC
P.O. Box 7247
Philadelphia, PA 19170-0378

1-800-LTC-FEDS (1-800-582-3337) *Note: This number is not free outside of the U.S. There are no toll-free numbers for overseas members.*

- To request Program literature, press **1**
- If you need help completing your application or have any questions, press **2** to speak with a Certified Long Term Care Insurance Consultant
- If you have already applied and have questions about your application or enrollment, press **3**.

Current office hours are Monday through Friday, 8 a.m. to 7 p.m., Eastern Time.



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